

UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>	Attorney Docket No. 9511-104-27 CONT	
	First Inventor or Application Identifier Kevin J. TRACEY	
	Title GUANYLHYDRAZONES USEFUL FOR TREATING DISEASES ASSOCIATED WITH T CELL ACTIVATION	


APPLICATION ELEMENTS <small>See MPEP chapter 600 concerning utility patent application contents</small>	ADDRESS TO: Assistant Commissioner for Patents Box Patent Application PO Box 1450 Alexandria, VA 22313-1450
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1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g. PTO/SB/17) <small>(Submit an original and a duplicate for fee processing)</small> <input checked="" type="checkbox"/> Applicant claims small entity status.	ACCOMPANYING DOCUMENTS 6. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))
2. <input checked="" type="checkbox"/> Specification Total Pages 25	7. <input type="checkbox"/> 37 C.F.R. §3.73(b) Statement <input type="checkbox"/> Power of Attorney <small>(when there is an assignee)</small>
3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) Total Sheets 5	8. <input type="checkbox"/> English Translation Document (if applicable)
4. <input checked="" type="checkbox"/> Oath or Declaration Total Pages 3 a. <input type="checkbox"/> Newly executed (original or copy) b. <input checked="" type="checkbox"/> Copy from a prior application (37 C.F.R. §1.63(d)) <small>(for continuation/divisional with box 16 completed)</small>	9. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations
5. <input checked="" type="checkbox"/> Incorporation By Reference (usable if box 4B is checked) <small>The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4B, is considered to be part of the disclosure of the accompanying application and is hereby incorporated by reference therein.</small>	10. <input type="checkbox"/> Preliminary Amendment
	11. <input checked="" type="checkbox"/> White Advance Serial No. Postcard
	12. <input type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small>
	13. <input type="checkbox"/> Request for Priority
	14. <input type="checkbox"/> List of Inventors' Names and Addresses
	15. <input type="checkbox"/> Other:

16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below: <input checked="" type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application no.: 09/705,581 Prior application information: Examiner: Riley, Jezia Group Art Unit: 1637
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17. Amend the specification by inserting before the first line the sentence: <input checked="" type="checkbox"/> This application is a <input checked="" type="checkbox"/> Continuation <input type="checkbox"/> Division <input type="checkbox"/> Continuation-in-part (CIP) of application Serial No. 09/705,581 Filed on November 2, 2000 which is a Divisional of application Serial No. 08/970,973 filed on November 14, 1997 now Patent 6,143,728 which claims benefit of 60/031,061 filed November 15 1996 <input type="checkbox"/> This application claims priority of provisional application Serial No. Filed
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18. CORRESPONDENCE ADDRESS Supervisor, Patent Prosecution Services PIPER RUDNICK LLP 1200 Nineteenth Street, N.W. Washington, D.C. 20036-2412 Telephone No. (202) 861-3900 Facsimile No. (202) 223-2085
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Name	Steven B. Kelber	Registration No.	30,073
Signature		Date	7/16/03
Name	Patrick R. Delaney	Registration No.	45,338

15535 U.S. PTO
 10/619426
 07/16/03

07/16/03

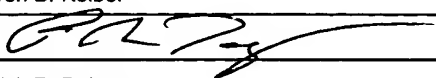
18334 U.S. PTO

FEE TRANSMITTAL

Docket No.	9511-104-27 CONT
Serial No.	New Application
Filing Date	Herewith
Inventor(s)	Kevin J. TRACEY, et al.
Group Art Unit	
Examiner	

TOTAL AMOUNT OF PAYMENT \$415.00

1. <input checked="" type="checkbox"/> Applicant claims small entity status.										FEE CALCULATION (continued)							
<input type="checkbox"/> Charge any UNDERPAYMENT or credit any OVERPAYMENT in the indicated fees to Deposit Account No. 50-1442. <input type="checkbox"/> Charge the indicated fees to Deposit Account No. 50-1442.										3. ADDITIONAL FEES							
2. <input checked="" type="checkbox"/> Check enclosed.										Large Entity		Small Entity		Fee Description		Fee Paid	
FEE CALCULATION										Fee Code	Fee (\$)	Fee Code	Fee (\$)				
1. BASIC FILING FEE										1051	130	2051	65	Surcharge-late filing fee or oath			
										1052	50	2052	25	Surcharge-late provisional filing fee or cover sheet			
Large Entity		Small Entity		Fee Description				1053	130	1053	130	Non-English specification					
Fee Code	Fee (\$)	Fee Code	Fee (\$)					Fee Paid	1812	2520	1812	2520	Ex parte reexam. fee				
1001	750	2001	375	Utility filing fee				\$375.00	1251	110	2251	55	1-mo. ext. of time				
1002	330	2002	165	Design filing fee					1252	410	2252	205	2-mo. ext. of time				
1003	520	2003	260	Plant filing fee					1253	930	2253	465	3-mo. ext. of time				
1004	750	2004	375	Reissue filing fee					1254	1450	2254	725	4-mo. ext. of time				
1005	160	2005	80	Provisional filing fee					1255	1970	2255	985	5-mo. ext. of time				
SUBTOTAL (1)								\$375.00	1401	320	2401	160	Notice of Appeal				
2. EXTRA CLAIM FEES										1402	320	2402	160	Appeal Brief			
tot. claims		9	-	20*	=	0	x	\$9	=	0	1403	280	2403	140	Request for Oral Hearing		
ind. claims		2	-	3*	=	0	x	\$42	=	0	1501	1300	2501	650	Utility/Reissue Issue Fee		
<input type="checkbox"/>		Multiple Dependent Claims				\$140	=				1502	470	2502	235	Design Issue Fee		
Large Entity		Small Entity		Fee Description				1503	630	2503	315	Plant Issue Fee					
Fee Code	Fee (\$)	Fee Code	Fee (\$)					1460	130	1460	130	Petitions to the Commissioner					
1202	18	2202	9	Claims in excess of 20				1806	180	1806	180	IDS Submission					
1201	84	2201	42	Independent claims in excess of 3				8021	40	8021	40	Assignment		\$40.00			
1203	280	2203	140	Multiple dependent claim, if not paid				1801	750	2801	375	For Filing RCE					
1204	84	2204	42	*Reissue independent claims over original patent				1802	900	1802	900	Expedited Design					
1205	18	2205	9	*Reissue claims in excess of 20 and over original patent				OTHER (indicate below):									
SUBTOTAL (2)								\$0.00									
* or number previously paid, if greater; For Reissues, see above										SUBTOTAL (3)				\$40.00			

Name	Steven B. Kelber	Registration No.		30,073	
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